

CANNON BUILDING 861 SILVER LAKE BLVD., SUITE 203 DOVER, DELAWARE 19904-2467

STATE OF DELAWARE DEPARTMENT OF STATE DIVISION OF PROFESSIONAL REGULATION REAL ESTATE COMMISSION REAL ESTATE EDUCATION COMMITTEE

TELEPHONE: (302) 744-4500 FAX: (302) 739-2711 WEBSITE: DPR.DELAWARE.GOV

REAL ESTATE INSTRUCTOR APPLICATION

	INSTRUCTIONS Submit applications for certification as a Real Estate Instructor at least 60 days before your employment start date. If you are re-applying for certification, submit the application at least 60 days before your prior certification expires. Failure to file within the appropriate time limit may be cause for rejection.							
	 Submit completed, signed and notarized <u>application</u>. Applications that are incomplete or unsigned will be rejected. 							
	 Enclose the <u>processing fee</u> by check or money order made payable to the "State of Delaware." Applications not accompanied by the required fee will be rejected. 							
	☐ Enclose a resume or other related documents that show how you meet the minimum qualifications.							
	If you have never been issued a U.S. Social Security Number (SSN), submit a Request for Exemption from Social Security Number Requirement. ■ The Privacy Act of 1974, Section 7, requires the following information to be given to all applicants: Applicants for any Delaware professional or occupational license, permit, registration or certificate (other than Gaming permits) are required to provide a U.S. SSN (29 Del. C. §8735(m)). The Division of Professional Regulation uses the SSN primarily to verify identity and safeguard personal information. It may also be used to enforce child support obligation (13 Del. C. §2216) and for other lawful purposes.							
TYP	TYPE OF APPLICATION							
1.	Check the situation that applies to you:							
	 ☐ I am applying for my first Delaware Instructor certification. ☐ I am reapplying for Delaware Instructor certification. The expiration date of my certification is: 							
IDEI	NTIFYING AND CONTACT INFORMATION							
2	Full Name:							
۷.	Full Name: Last First Middle							
3	Other Names Used:							
.	(Include maiden, prior married, alternate spellings)							
4.	Date of Birth (month/day/year): Gender: Male Female							
	Have you been issued a U.S. Social Security Number? Yes \(\subseteq \text{No} \subseteq \text{If yes, enter your SSN:} \) If no, you must file a Request for Exemption from Social Security Number Requirement.							
6.	Mailing Address:							
	City State Zip							
7.	Phone:							

Home

Work

EDUCATION

8.	Enter the following about your high school education:							
	High School: Graduation Year:							
	Address:							
9.	Do you have any education after high school? Yes No If yes, enter the following about your postgraduate education:							
	College or University:							
	Address:							
	Year of Graduation: Degree Earned:							
10.	0. Are you currently licensed as an attorney? Yes No If yes, when was your license first issued?							
ЕМ	MPLOYMENT							
11.	. Employer Name:							
	. Address:							
	City State Zip							
13.	. Work Phone:							
ME	EMBERSHIP IN REAL ESTATE BOARDS, STATE OR NATIONAL ASSOCIATIONS							
14.	Do you currently hold an active license as a: Real estate Broker? Yes □ No □ If yes, enter state where licensed and license number:							
	Salesperson? Yes No If yes, enter state where licensed and license number:							
15.	. Are you a member of a local Board/Association? Yes No							
16.	. Are you a member of any other professional Boards or Associations? Yes No If yes, list them below:							
								
EX	PERIENCE							
17.	. Do you hold a valid teaching credential or certificate issued by the State of Delaware or another jurisdiction with qualifications which equal or exceed the qualification standards of the State of Delaware? (For information on Delaware's qualification standards, see Section 9.0 of the <u>Guidelines for Fulfilling the Delaware Real Estate Education Requirements</u> .) Yes \(\square \text{No} \square \text{If yes, skip to Question 19.} \) If no, continue with Question 18.							
18.	. Do you have five years teaching experience? Yes \(\subseteq \text{No } \subseteq If yes, enter the following about your teaching experience. If you need more room, enclose a separate sheet.							
	School:							
	Address:							
	Dates of Experience From: To: (month/year) (month/year)							
19.	. Do you have any experience related to real estate, such as teaching of real estate, awards received, articles published or offices held on a national, state or local level? Yes \(\square\) No \(\square\) If yes, list them below:							

20.	. Do you have any experience that is <i>not</i> related to real estate, such as teaching, professional awards, articles published or any business, trade or professional offices held on a national, state or local level.? Yes No If yes list them below:							
RE	FERENCES							
21.	List two people with whom you are acquainted who know your teaching skills:							
	NAME		ADD	RESS		PHONE		
DIS	SCLOSURES							
22.	Have you ever been convicted misdemeanor or any other cri jurisdiction? Yes No I in which you have been cor record, see State Bureau of	minal offense, inclu f yes, submit a ce nvicted or pardone	uding any offertified copy	ense in which you he of your criminal h	ave received a pa istory record from	rdon, in any m any jurisdiction		
23.	3. Are criminal charges against you pending in any jurisdiction? Yes \(\square\) No \(\square\) If yes, submit a letter giving a complete explanation. Include copies of all appropriate records.							
24.	I. Have you ever had a professional license or instructor certification/approval suspended, revoked, or subject to other disciplinary action (including reprimand or fine) in any jurisdiction? Yes \(\subseteq \) No \(\subseteq \) If yes, submit a letter giving a complete explanation. Include copies of all appropriate records.							
25.	5. Have you had any civil judgment entered against you based on fraud, misrepresentation, or deceit? Yes No yes, submit a letter giving a complete explanation. Include copies of all appropriate records.							
то	PICS APPLIED FOR AND QU	ALIFICATIONS						
26.	Check each topic area(s) for	which you are apply	ying to recei	ve certification.				
	Continuing Education: Legislative Update Salesperson Core Course(s) Broker Core Course(s) Delaware Real Estate Commission Property Management Course(s) Professional Enhancement for Practicing Licensees (list all topics you are requesting approval to teach):							
								
	Pre-Licensing Course:		Пь	ool Estato Law				
	☐ Orientation☐ Real Estate Sales			eal Estate Law eal Estate Mathema	tics			
	Broker's Course: Brokerage (Sales Man Real Estate Document Valuing Real Property Financing	nts	☐ L ☐ R	thics egal and Governmel eal Estate Investme lathematics		al Estate		
27.	Do you have <i>five years full tin</i> instruction checked above?		e trade, bus	ness, or profession	that relates to the	topic(s) of		

28.	You must have education, training and/or experience demonstrating competence in the topic area(s) for which you are applying. Explain how you meet the instructor qualifications outlined Section 9.0 of the <u>Guidelines for Fulfilling the Delaware Real Estate Education Requirements</u> . You may use additional sheets of paper if needed. (Note that "see attached" is not acceptable.)				
	Submit a resume and other related documents that show how you meet the minimum qualifications.				
	DECLARATION				
nav as e	ereby apply for approval as an instructor, and I attest to having qualities of honesty, integrity and trustworthiness. I be read and agree to comply with the Delaware Real Estate license law and regulations and the education guidelines established by the Delaware Real Estate Commission. I understand that this certification, if granted, will expire on date specified and will only be granted for the topic areas for which I may be approved.				
any	s the stated policy of the Delaware Real Estate Commission that at no time during periods of instruction shall person involved in any approved real estate educational activity, use, or attempt to use, the position of tructor, sponsor or provider to solicit employees or sales representatives.				
Sig	jnature : Date:				
	PPLICATIONS THAT ARE UNSIGNED INCOMPLETE OR NOT ACCOMPANIED BY THE REQUIRED FEE WILL BE				

APPLICATIONS THAT ARE UNSIGNED, INCOMPLETE OR NOT ACCOMPANIED BY THE REQUIRED FEE WILL BE REJECTED.